

APPLICATION FOR AMATEUR RADIO STATION AND/OR OPERATOR LICENSE

NO FCC FILING FEE REQUIRED (see instruction H)

ADMINISTERING VEC REPORT		EXAMINATION ELEMENTS							
Applicant is credited for: <input checked="" type="checkbox"/>		1(A)	1(B)	1(C)	2	3(A)	3(B)	4(A)	4(B)
A. FCC Amateur license held (97.25(a)):	Class <input checked="" type="checkbox"/>	(NT)	(GA)		(NTGA)	(TGA)	(GA)	(A)	
B. CERTIFICATE(S) OF SUCCESSFUL COMPLETION OF AN EXAMINATION HELD (97.25(b)):		Date issued	Date issued	Date issued	Date issued	Date issued	Date issued	Date issued	Date issued
C. FCC Commercial Radiotelegraph Operator License held (97.25(c)):	Number: <input checked="" type="checkbox"/>			Exp Date					
D. Examination elements passed that were administered at this session:									
E. APPLICANT is qualified for operator license class: <input type="checkbox"/> None:		H. Date of VEC coordinated examination session:							
E1. <input checked="" type="checkbox"/> NOVICE (Elements 1(A), 1(B), or 1(C) and 2)		12-17-89							
E2. <input type="checkbox"/> TECHNICIAN (Elements 1(A), 1(B), or 1(C), 2 and 3(A))		I. VEC Receipt Date:							
<input type="checkbox"/> GENERAL (Elements 1(B) or 1(C), 2, 3(A), and 3(B))		JAN 15 1990							
<input type="checkbox"/> ADVANCED (Elements 1(B) or 1(C), 2, 3(A), 3(B) and 4(A))									
<input type="checkbox"/> AMATEUR EXTRA (Elements 1(C), 2, 3(A), 3(B), 4(A), and 4(B))									
F. Name of Volunteer-Examiner Coordinator: (VEC coordinated sessions only)									
G. Examination session location: (VEC coordinated sessions only)									

SECTION I

1. IF YOU HOLD A VALID LICENSE ATTACH THE ORIGINAL LICENSE OR PHOTOCOPY ON BACK OF APPLICATION. IF THE VALID LICENSE OR CERTIFICATE OF SUCCESSFUL COMPLETION OF AN EXAMINATION WAS LOST OR DESTROYED, PLEASE EXPLAIN.			
2. CHECK ONE OR MORE ITEMS, NORMALLY ALL LICENSES ARE ISSUED FOR A 10 YEAR TERM.			
2A. <input type="checkbox"/> RENEW LICENSE—NO OTHER CHANGES <input checked="" type="checkbox"/>		EXPIRATION DATE (Month, Day, Year)	
2B. <input type="checkbox"/> REINSTATE LICENSE EXPIRED LESS THAN 2 YEARS <input checked="" type="checkbox"/>			
2C. <input checked="" type="checkbox"/> EXAMINATION FOR NEW LICENSE		FORMER LAST NAME SUFFIX (Jr., Sr., etc.)	
2D. <input type="checkbox"/> EXAMINATION TO UPGRADE OPERATOR CLASS			
2E. <input type="checkbox"/> CHANGE CALL SIGN (Be sure you are eligible—See Inst. 2E)		FORMER FIRST NAME MIDDLE INITIAL	
2F. <input type="checkbox"/> CHANGE NAME (Give former name) <input checked="" type="checkbox"/>			
2G. <input type="checkbox"/> CHANGE MAILING ADDRESS			
2H. <input type="checkbox"/> CHANGE STATION LOCATION			
3. CALL SIGN (If you checked 2C above, skip items 3 and 4)		4. OPERATOR CLASS OF THE ATTACHED LICENSE:	
5. CURRENT FIRST NAME	M.I.	LAST NAME	SUFFIX (Jr., Sr., etc.)
RICHARD	A	BURTON	
6. DATE OF BIRTH (Month, Day, Year)			
05-13-44			
7. CURRENT MAILING ADDRESS (Number and Street)		CITY	STATE ZIP CODE
1653 W. ANAHEIM ST. #7		HARBOR CITY	CA 90710
8. CURRENT STATION LOCATION (Do not use a P.O. Box No., RFD No., or General Delivery. See Instruction 8)		CITY	STATE
1653 W. ANAHEIM ST #7		HARBOR CITY	CA
9. Would a Commission grant of your application be an action which may have a significant environmental effect as defined by Section 1.1307 of the Commission's Rules? See instruction 9. If you answer yes, submit the statement as required by Sections 1.1308 and 1.1311. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
10. Do you have any other amateur radio application on file with the Commission that has not been acted upon? If yes, answer items 11 and 12. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
11. PURPOSE OF OTHER APPLICATION		12. DATE SUBMITTED (Month, Day, Year)	
CERTIFICATION			
I CERTIFY THAT all statements herein and attachments herewith are true, complete, and correct to the best of my knowledge and belief and are made in good faith; that I am not a representative of a foreign government; that I waive any claim to the use of any particular frequency regardless of prior use by license or otherwise; and that the station to be licensed will be inaccessible to unauthorized persons.			
WILL ALL FALSE STATEMENTS MADE ON THIS FORM OR ATTACHMENTS ARE PUNISHABLE BY FINE AND IMPRISONMENT U.S. CODE TITLE 18, SECTION 1001			
13. SIGNATURE OF APPLICANT (Must match item 5)		14. DATE SIGNED:	
Richard A. Burton		12-17-89	

(OVER)

**ATTACH THE ORIGINAL LICENSE OR PHOTOCOPY HERE**

**SECTION II—EXAMINATION INFORMATION**

**SECTION II-A FOR NOVICE OPERATOR EXAMINATION ONLY.** To be completed by the Administering VEs after completing the Administering VE's Report on the other side of this form.

**CERTIFICATION**

I CERTIFY THAT I have complied with the Administering VE requirements stated in Part 97 of the Commission's Rules; THAT I have administered to the applicant and graded an amateur radio operator examination in accordance with Part 97 of the Commission's Rules; THAT I have indicated in the Administering VE's Report the examination element(s) the applicant passed; THAT I have examined documents held by the applicant and I have indicated in the Administering VE's Report the examination element for which the applicant is given examination credit in accordance with Part 97 of the Commission's Rules.

1A. VOLUNTEER EXAMINER'S NAME: (First, MI, Last, Suffix) (Print or Type)

*JOHN R. GIBSON*

1B. VE'S MAILING ADDRESS: (Number, Street, City, State, ZIP Code)

*3344 WOOD TERRACE LOS ANGELES CA 90027*

1C. VE'S OPERATOR CLASS:

☐ GENERAL

☐ ADVANCED

☒ AMATEUR EXTRA

1D. VE'S STATION CALL SIGN

*AA6NL*

1E. LICENSE EXPIRATION DATE:

*04-25-99*

1F. IF YOU HAVE AN APPLICATION PENDING FOR YOUR LICENSE, GIVE FILING DATE:

1G. SIGNATURE: (Must match Item 1A)

*John R. Gibson*

DATE SIGNED

*12-17-89*

2A. VOLUNTEER EXAMINER'S NAME: (First, MI, Last, Suffix) (Print or Type)

*KAMIRO CARDENAS*

2B. VE'S MAILING ADDRESS: (Number, Street, City, State, ZIP Code)

*1158 W. 28<sup>TH</sup> STREET LOS ANGELES, CA. 90007*

2C. VE'S OPERATOR CLASS:

☐ GENERAL

☐ ADVANCED

☒ AMATEUR EXTRA

2D. VE'S STATION CALL SIGN

*WW6X*

2E. LICENSE EXPIRATION DATE:

*08/19/96*

2F. IF YOU HAVE AN APPLICATION PENDING FOR YOUR LICENSE, GIVE FILING DATE:

2G. SIGNATURE: (Must match Item 2A)

*Kamiro Cardenas*

DATE SIGNED

*12/17/89*

**SECTION II-B FOR TECHNICIAN, GENERAL, ADVANCED, OR AMATEUR EXTRA OPERATOR EXAMINATION ONLY.** To be completed by the Administering VEs after completing the Administering VE's Report on the other side of this form.

**CERTIFICATION**

I CERTIFY THAT I have complied with the Administering VE requirements stated in Part 97 of the Commission's Rules; THAT I have administered to the applicant and graded an amateur radio operator examination in accordance with Part 97 of the Commission's Rules; THAT I have indicated in the Administering VE's Report the examination element(s) the applicant passed; THAT I have examined documents held by the applicant and I have indicated in the Administering VE's Report the examination element(s) for which the applicant is given examination credit in accordance with Part 97 of the Commission's Rules.

1A. VOLUNTEER EXAMINER'S NAME: (First, MI, Last, Suffix) (Print or Type)

*JOHN R. GIBSON*

1B. VE'S STATION CALL SIGN:

*AA6NL*

1C. SIGNATURE: (Must match Item 1A)

*John R. Gibson*

DATE SIGNED:

*12-17-89*

2A. VOLUNTEER EXAMINER'S NAME: (First, MI, Last, Suffix) (Print or Type)

*PHILIP L. ABEL*

2B. VE'S STATION CALL SIGN:

*AA6NB*

2C. SIGNATURE: (Must match Item 2A)

*Phil L. Abel*

DATE SIGNED:

*12/17/89*

3A. VOLUNTEER EXAMINER'S NAME: (First, MI, Last, Suffix) (Print or Type)

*LAWRENCE TORRES*

3B. VE'S STATION CALL SIGN:

*KJ6TW*

3C. SIGNATURE: (Must match Item 3A)

*Lawrence Torres*

DATE SIGNED:

*12-17-89*